

DO/EO BIBLIOGRAPHIC DATA ENTRY

ERIAL NUMBER: 09 / 700284 RECEIPT DATE: 11 / 12 / 98
A NUMBER: PCT/ US99 / 10603 IA FILING DATE: 05 / 13 / 99
AMILY NAME: DENT DELAY WAIVED (Y/N): N
IVEN NAME: PAUL W. DEMAND RECEIVED (Y/N): Y
RORITY CLAIMED (Y/N): Y PRIORITY DATE: 05 / 15 / 98
O BASIC FEE (Y/N): N US DESIGNATED ONLY (Y/N): N
TTOREY DOCKET NUMBER: P090505-US1 COUNTRY:
ORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 0000000000
FAX

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CITY: CHICAGO

STATE/COUNTRY: IL ZIP: 60661

MAIL:

APPLICATION TITLES:

SIGNAL DECODING WITH AND WITHOUT SECOND SYNCHRONIZATION WORD IN A MOBILE COMMUNICATION SYSTEM

TAB TO LAST POSITION, PUSH SEND



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Bib Data Sheet

SERIAL NUMBER 09/700,284	FILING DATE 11/13/2000 RULE	CLASS 455	GROUP ART UNIT 2681	ATTORNEY DOCKET NO. P09505-US1
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APPLICANTS

Paul W. Dent, Pittsboro, NC ;
 Krister Raith, San Diego, CA ;

**** CONTINUING DATA *******

THIS APPLICATION IS A 371 OF PCT/US99/10603 05/13/1999 *TQ*
 WHICH CLAIMS BENEFIT OF 60/085,710 05/15/1998

**** FOREIGN APPLICATIONS *******

No No *TQ*
IF REQUIRED, FOREIGN FILING LICENSE

GRANTED ** 01/02/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NC	SHEETS DRAWING 4	TOTAL CLAIMS 25	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after <i>allowance</i>				
Verified and Acknowledged	<i>[Signature]</i>	Examiner's Signature	Initials		

ADDRESS

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TITLE

Signal decoding with or without second synchronization word in a mobile communication system

FILING FEE RECEIVED 1288	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit